



Media Release

October 28, 2020

Medical Officer of Health – Halloween Message

Halloween is a fun break from our everyday routines. For most people, anytime one remembers or thinks of Halloween, they most likely catch themselves smiling. Our children's mental wellbeing desperately needs this type of smile during this emergency. However, with COVID-19 we all owe it to children to give them a safe Halloween – a modified Halloween.

So here is the thing. If you are unwell, don't even think about it. Stay at home and away from others. Virtual Halloween is all you'll find on our menu. Just skip to the end of this message.

If you are part of a household, rather than the traditional trick-or-treat, we encourage you and your children to explore alternative ways to celebrate. Have your own Halloween-themed party at home. Be creative; dressing up, decorating, crafts, carve a pumpkin or carve a dozen pumpkins, and scavenger hunts are some ideas for all ages.

If you are a child in Grey and Bruce, you are in luck. If you choose to go out to trick-or-treat, we encourage you to only go out with members of your household, do not congregate in groups, keep social distances, and wear a face covering – a costume mask doesn't count. Choose a costume that makes wearing a mask or face covering easy. Remember the usual Halloween safety practices, dress for the weather, wear reflectors, watch for traffic, and check overall treats before eating. If offering candy, allow for touchless trick-or-treating.

If you are over 18 years old, as a responsible adult, kindly skip Halloween this year. The less people participate, the less is the risk. Let's focus our efforts on ensuring a safe Halloween for children. With so many Halloweens under your belt, I hope we can skip it this year without any difficulty. Unlike children, you don't qualify for Medical Officer of Health recommendations of indoor parties. In fact, adult-themed Halloween parties, especially parties where alcohol is available, are strongly discouraged. They are a recipe for spreading the virus- a scary recipe. By scary, I don't mean Halloween scary; I mean real life-and-death scary; emotionally-scaring scary. As we saw with Thanksgiving, parties encourage people to mix and mingle and spread the virus. Even if people recovered from COVID-19 as an illness, the damage to their lifelong friendships and relationships in close-net communities may not recover that well. If you must gather, consider outdoors and limit the numbers. It is the letter of the law to have less

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than 10 people indoors or 25 outdoors. If you are wondering, the answer is “NO”, these two numbers are not to be combined; either indoors or outdoors.

Please remember the Three Ws, Watch your distance, Wash your hands, and Wear a mask.

To learn more on enjoying a safe Halloween and to avoid becoming an acquaintance with our Contact Tracers through receiving a gazillion phone calls from them in 14 days from Halloween, please visit our [website](#).

Let's make Halloween safe and enjoyable for everyone. And I remain,

Yours very truly,

Dr. Ian Arra

For More Information:

Dr. Ian Arra, MD MSc FRCPC ACPM ABPM

Medical Officer of Health and Chief Executive Officer

To arrange to speak with Dr. Arra, please contact Drew Ferguson at:

519-376-9420 or 1-800-263-3456 ext. 1269 or d.ferguson@publichealthgreybruce.on.ca



Media Release

October 27, 2020

COVID-19 Community Cluster

The Grey Bruce Health Unit is working to lessen concerns and manage unwarranted anxiety in the community as related to a cluster of COVID-19 cases in the Municipality of South Bruce Peninsula.

Some of the seven cases associated with this cluster did not have their guard up over the past two weeks, including Thanksgiving weekend. Case management undertaken by the Grey Bruce Health Unit assessed the risk for a significant number of contacts associated with some of these cases.

It is important to note that the first case identified in a cluster, including this one, is not necessarily the source case that transmitted to other cases in the cluster.

Achieving containment of a cluster requires cases to be completely forthcoming in providing details of all contacts. Failure of a case to provide full and complete list of close contacts has the potential to hinder Public Health investigations. Whether additional cases emerge or not, the investigation most often will lead to identifying the individuals that failed to provide complete information. These individuals are not only potentially putting others at risk they are predisposing themselves to the possibility of Section 22 Order under the Health Protection and Promotion Act that may entail serious fines and civil court action for injunction on an expedited basis.

Determining who is a close contact is a decision that can only be made by Public Health. A Public Health case manager contacts anyone identified as a contact to the confirmed cases directly. **Anyone NOT contacted by Public Health is not considered at risk and need not take any additional steps, including asymptomatic testing.**

Additional community response, such as closing facilities, is not required unless directed by Public Health. In this instance, there is no direction nor order given. However, municipalities are entitled to close their facilities.

These cases further confirm that most local transmission is likely community-based and more often than not through household contacts, or close contact in other people's homes, at parties, and other social gatherings. This is a specific reason why close contact with anyone outside of your household is discouraged.

Currently, there are no COVID-19 outbreaks, evidence of transmission from person to person in any school, childcare centre, or long-term care/retirement home in Grey Bruce.

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Public Health takes the lead in all outbreaks and case management. We will let you know if you were in close contact with someone who has COVID-19, based on a thorough risk assessment completed only by Public Health. For more information, visit our website www.publichealthgreybruce.on.ca

For More Information:

Dr. Ian Arra, MD MSc FRCPC ACPM ABPM

Medical Officer of Health and Chief Executive Officer

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Media Release

October 29, 2020

Flu Vaccine

Flu vaccine is available at 48 local pharmacies across Grey Bruce, offering flu shots to those ages 5 and older. The high demand for flu shots this year may result in pharmacies running out before their next shipment but they are constantly being re-supplied; check with your local pharmacy for availability. This supply/demand issue is occurring province-wide.

Flu vaccine is available through health care providers – most health care providers are doing appointment only and a few are providing mass-immunization clinics due to COVID-19. All health care providers should have flu vaccine available for clients now. Throughout October, health care providers have focussed on vaccinating high-risk clients. With that mostly complete, attention turns to vaccinations for the general population.

High dose flu is available in very limited quantities from pharmacies and health care providers.

Regarding time of receiving the flu vaccine, the general message is “don’t wait for a particular flu vaccine – get vaccinated. There is no preferential flu vaccine.” Nevertheless, your health care provider is the best judge on when it would be optimal for you to get the vaccine based on your individual health status, their expertise with understanding the community health need in their catchment area, and the plans they have to allocate resources to address these needs.

“It is likely that flu virus and COVID-19 will both spread this fall and winter.” Says Grey Bruce Medical Officer of Health Dr Ian Arra. “Healthcare systems could be overwhelmed treating both patients with the flu and patients with COVID 19. This means getting a flu shot during 2020 season is more important than ever!”

While getting a flu shot will not protect against COVID 19, there are important benefits:

1. Flu vaccines have been shown to reduce the risk of flu illness, hospitalization and death.
2. Getting a flu vaccine can also save healthcare resources for the care of patients with COVID-19. (www.cdc.gov/flu/prevent/vaccine-benefits.htm)

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Media Release

October 30, 2020

Students Cleared to Return to School

Students considered at high-risk in connection with cases of COVID-19 associated with Osprey Central School in Municipality of Grey Highlands are clear to return to school. The 80 students, and 9 adults also associated with the cases, tested negative for COVID-19, and all completed 14 days of isolation.

On October 18, Public Health reported cases associated with the school. Three classes at the school, students who rode on the school bus, and adults associated with the cases were identified as high-risk and required to self-isolate for 14 days.

The Grey Bruce Health Unit deployed a mobile testing team to the Osprey Community Hall parking lot last week to test those considered high-risk. All of those swabbed tested negative for COVID-19.

Currently, there are no COVID-19 outbreaks, that is, evidence of transmission from person to person, in any schools or childcare centres in Grey Bruce.

Public Health takes the lead in all outbreaks and case management. We will let you know if you are a close contact with someone who has COVID-19 and what further action you may be required to take. Only Public Health can determine who is a close contact of someone who has COVID-19.

Public Health thanks all the families involved in the contact tracing and testing for their cooperation. Thanks also go out to Bluewater District School Board for their help to identify contacts and support to keep the school open. The Municipality of Grey Highlands assisted by providing a convenient and accessible location for community testing.

Attachments: photos, Osprey Community Hall COVID-19 Mobile Testing Team

For More Information:

Dr. Ian Arra, MD MSc FRCPC ACPM ABPM

Medical Officer of Health and Chief Executive Officer

To arrange to speak with Dr. Arra, please contact Drew Ferguson at:

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Letter to the Editor

October 29, 2020

Kindness not Bullying - Please

Dear Community,

As COVID-19 cases continue to climb, I want to discuss a very important unintended consequence that has become more common in recent months. This unintended consequence is that many people and their families have been victims of bullying after testing positive for COVID-19.

Please do not take this note as an indication that we are not doing well. Grey Bruce is doing fantastic to work together to ensure we are successful. I do want to congratulate everyone for helping to ensure success in regards to COVID-19. Saying that, we must always identify challenges, and ways we can improve the situation even more, especially with us moving in to a potential second wave.

In this day and age, bullying should not be tolerated. The impacts can be extreme no matter our age when bullied. Nobody typically tries to get COVID-19, and nobody deserves bullying as a result. I find it so disheartening that friends, community, and even family could bully someone, who, contracts a virus (Any virus).

My message to the community is simple; let us act out of love, compassion, sympathy, and empathy, instead of leaning on misunderstanding and frustration. Let us put ourselves in the shoes of a family that gets the phone call; "you are positive for COVID-19". Let us imagine the emotions that we would feel with that diagnosis and the implications that it has on our family, friends, colleagues, work, income, and other potential supports. Imagine your child receiving a diagnosis and thinking about the potential impacts that it will have on their friends, school, bus, extracurricular activities and other families. Think of a teenager in an especially vulnerable stage of life and the life-altering impacts bullying would have on them.

We manage these calls regularly at the Health Unit. We listen to the hardships that families endure after their diagnoses. We hear the parents voice tremendous concern and helplessness when their children are ostracized or targeted. We hear from adults who share their stories of employment issues, lack of support, and being shunned for periods well beyond the period of communicability.

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I want everyone to know, COVID-19 may come and go, but our actions during this difficult time will stay with us forever. I strongly urge:

- **You** to think about your actions and words when you know someone is going through a diagnosis and recovery.
- **Parents** to talk openly with your children about the importance of kindness and understanding. Reach out to offer your support to other parents.
- **Teachers** to talk about this with their students and be watchful for bullying in the classroom or playground. When you see, stop it.
- **Community leaders** to speak out on the importance of acceptance, empathy, and kindness
- **Everyone**; stop bullying when you see it

We are in this together, and we must all lean on each other. Now is not the time to get angry and bully each other. Now is the time to carry each other through tough times, knowing that we may need to assistance, encouragement and support at some point in the future. Let us collectively fight this pandemic as a united community. The only way to do this is by understanding, and being sympathetic to each other's situation.

We have done fantastic so far during COVID-19, but these stories are becoming too common.

Thank you for listening, and please, be kind to one another.

For some great resources regarding kindness and ending bullying, please click below:

- [COVID-19 and Bullying Info Sheet](#)
- [Poster - Spread Kindness Stop Bullying of Children with COVID19](#)
- [Poster - Spread Kindness Stop the Bullying of Those with COVID19](#)

Sincerely,

Ian Reich, Public Health Manager

For More Information:

Ian Reich, RN, BScN, EMBA
Public Health Manager
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Media Release

November 3, 2020

COVID-19 Investigation

The Grey Bruce Health Unit is investigating the extent of contacts by an individual, positive for COVID-19, who was **likely shedding virus while socializing with students, and others, in Dundalk on Halloween night. Public health is in the process of identifying who might be at risk of transmission.**

Due the incubation period of the virus, those who may be have been exposed from socializing with the individual are not considered to be shedding the virus themselves, at this time. Therefore, these people should not be going to assessment centres, nor self-isolate until directed to do so by public health.

There is no value in anyone being tested ahead of this. Results from early testing would be unreliable and put individuals at risk of more testing than is required

Furthermore, there is no need for extraordinary measures in the community, such as closure of facilities.

We are aware that some of the partygoers are students attending Grey Highlands Secondary School in the Municipality of Grey Highlands. We have been in contact with the school and Board officials, and there is no need for any extraordinary measures in the school. Those at risk of infection will be contacted within 24 hours. If you were at a party in Dundalk on Halloween night with a number of students, please check for messages from public health today or contact public health at 1-800-263-3456 ext 3000 or contactus@publichealthgreybruce.on.ca

Anyone NOT contacted by public health is not considered at risk and need not take any additional steps including asymptomatic testing.

Currently, there are no COVID-19 outbreaks, that is, evidence of transmission from person to person, in any schools or childcare centres in Grey Bruce.

Public health is the lead in all cases and case management. Determining who is a close contact is a decision that can only be made by public health. A public health case manager will contact anyone identified as a contact to the confirmed case, both in and outside the school environment.

The person who tested positive has been contacted directly by our COVID-19 Case and Contact Management Team and is self-isolating. We are working with that individual

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and the Bluewater District School Board to identify others, both in and out of the school environment, who may have been exposed and determine their risk level.

All contact tracing and determination of individual and community risk is made by public health. This is true of all cases, whether in schools, workplaces or the community. A health care provider or school official cannot make this decision.

For More Information:

Dr. Ian Arra, MD MSc FRCPC ACPM ABPM

Medical Officer of Health and Chief Executive Officer

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Media Release

Nov. 3, 2020

Sacred Heart Students Cleared to Return to School

Students considered at high-risk in connection with the COVID-19 case associated with Sacred Heart High School in the Municipality of Brockton are clear to return to school. There were 44 high-risk contacts identified, and they all completed 14 days of isolation as of November 3, 2020.

On October 22, Public Health reported a case associated with the school. Two classes at the school were identified as high-risk and required to self-isolate for 14 days. Public Health identified no school bus routes related to this case.

Those considered high-risk were advised to test at local assessment centres—all of those swabbed tested negative for COVID-19.

Currently, there are no COVID-19 outbreaks, that is, evidence of transmission from person to person, in any schools or childcare centres in Grey Bruce.

Public Health takes the lead in all outbreaks and case management. We will let you know if you are a close contact with someone who has COVID-19 and what further action you may be required to take. Only Public Health can determine who is a close contact of someone who has COVID-19.

Public Health thanks all the individuals and families involved in the contact tracing and testing for their cooperation. Thanks also go out to Bruce-Grey Catholic District School Board for their help to identify contacts and support.

For More Information:

Dr. Ian Arra, MD MSc FRCPC ACPM ABPM

Medical Officer of Health and Chief Executive Officer

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Kelly Lush

From: Dr. Arra, Ian (MOH) <I.Arra@publichealthgreybruce.on.ca>
Sent: November-05-20 3:30 PM
To: Dr. Arra, Ian (MOH)
Cc: Drew Ferguson; Erin Meneray
Subject: Grey Bruce Public Health COVID-19 Resources and Information: November 5, 2020



As part of our on-going efforts to keep you up-to-date on COVID-19 related information, we are providing resources and links that may be useful for you and your organization.

*Please be advised you are receiving this email notification based on previous electronic communications with the Grey Bruce Health Unit and/or our community partners. If you **not wish to receive** these communication updates from Grey Bruce Public Health, please email: a.gaviller@publichealthgreybruce.on.ca*

November 5, 2020

Here are links to some COVID-19 resources/information you may find useful. Many of these items are available on the [GBHU website](#) and may be shared publicly. If you have any questions, please call the Help Line At: 519-376-9420 ext 3000

Please note: The Grey Bruce Public Health website has been updated to include dedicated COVID-19 webpages for [Schools](#), [Childcare Centres](#), and [Professional Workplaces](#). The new Professional Workplaces section provides sector-specific information for: Hospitals, Primary Care, Long-Term Care Homes, Retirement Homes, Congregate Settings, Workplaces and Businesses, Personal Service Settings, Places Where People Gather and Funeral Homes.

1. [Media Release Flu Vaccine Oct 29 2020](#)
2. [Media Release Students Cleared to Return to School Oct 30 2020](#)
3. [Media Release Sacred Heart Students Cleared to Return to School Nov 3 2020](#)
4. [Media Release COVID-19 Investigation Nov 3 2020](#)
5. [COVID-19 and Short Term Rentals](#) (updated)
6. [Guidance for Taxis and other Ride Support Vehicles during COVID-19](#) (updated)
7. [Considerations for Shelters](#) (updated)
8. [Considerations for Outdoor and Recreational Activities during COVID-19](#) (updated)
9. [COVID-19 Considerations for Communal Dining in Care Settings](#) (updated)
10. [Going Out Infographic](#) (new)
11. [Shopping Safely Infographic](#) (new)
12. [Taking Public Transit Infographic](#) (new)
13. OPHA COVID-19 Summary of Key Developments for October 23rd, 27th, 28th, 29th (*below Social Media links*)

For additional school reopening resources please visit:

<https://www.publichealthgreybruce.on.ca/COVID-19/School-Reopening-2020>

For information from your local school board visit:

Bluewater District School Board https://www.bwdsb.on.ca/Parents/Return_to_School

Bruce Grey Catholic District School Board <https://www.bgcdsb.org/>

**If you have any questions, please call the Help Line At:
519-376-9420 ext 3000**

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[Instagram:](#) gbpublichealth



[YouTube:](#) GreyBruceHealthUnit

OPHA COVID-19 Key Developments November 4

Provincial Developments:

Outbreaks and Testing:

- Associate Chief Medical Officer of Health, Dr. Yaffe noted 33 new outbreaks were reported yesterday, while weekly trends showed 107 outbreaks; a 10% increase over the week before;
- About half of the outbreaks are in vulnerable sectors, including long-term care and retirement homes, group homes and hospitals;
- Dr. Yaffe noted in many of these settings there are challenges with preventive measures not being followed during social times such as breaks and people going to work when they are ill;
- In response to criticism that the province has failed to reach its targeted testing goals of 50,000 tests per day, Premier Ford said "outside of knocking on every door and dragging people to get tested, our capacity is up to 50,000 right now;"
- In response to a question about "mandatory targeted testing" for restaurant workers, Dr. Yaffe indicated that is "something a workplace employer can decide to do;"
- Dr. Yaffe noted that screening people who are asymptomatic at assessment centers puts pressure on the testing system while the priority should be people who are ill or contacts.

COVID-19 Response Framework:

- Premier Ford defended his government's new [colour-coded tiered framework](#) from criticisms that suggest new thresholds requiring a 10% positivity rate before the red level of restrictions is imposed are set too high and will lead to further community spread of the virus.
- Premier Ford said the plan is ultimately about "early intervention to avoid getting to the red zone," while emphasizing "it's unprecedented when it comes to transparency."
- Dr. Yaffe indicated that recommendations would be made to the government, if any issues were to be found with the new framework.
- In response to criticisms about the general confusion around the new framework, Premier Ford called out the "armchair quarterbacks" that are criticizing his government's plans suggesting they must not have read the 20-page PowerPoint slide deck released yesterday.
- Dr. Yaffe explained the government is working to balance the control of the disease and the severe impact that can result from these measures on people's economic, social and mental well-being.

Long-Term Care Homes:

- Dr. Yaffe said her team is working closely with the Ministry of Long-Term Care around measures to address the shortcomings seen in the first wave, including: increased infection prevention control; human resource staffing; as well as pairing homes with hospital infection control specialists.

Federal Developments:

[Preliminary Guidance on COVID-19 Vaccination:](#)

- The National Advisory Committee on Immunization has provided the government and the Public Health Agency of Canada with recommendations to prioritize key populations for early COVID-19 vaccination until there is enough vaccine for everyone who wants it.
- Dr. Tam explained that federal, provincial and territorial governments will have to make important decisions on how to use a limited supply of vaccines to protect high-risk populations and those who help keep our pandemic response, society and economy running.

Details and Links to Other Announcements:

- [Broadband and Cellular Access](#): The Ontario government is investing an additional \$680M to expand broadband and cellular access to improve connectivity in areas of need across Ontario.

Trends and Cases in Ontario, Canada and First Nations on Reserve:

[Cases Among First Nations on Reserve:](#)

As of November 3rd, Indigenous Services Canada is aware of these confirmed cases of COVID-19 for First Nations communities:

- 1,655 confirmed positive COVID-19
- 535 active cases
- 84 hospitalizations
- 1,105 recovered cases
- 15 deaths

[Cases in Ontario](#): (November 3rd as of 10:30am)

- Total number of cases: 79,692; an increase of 987
- The majority of newly confirmed cases are concentrated in four public health units (e.g. 319 new cases in Toronto, 299 in Peel Region, 85 in York Region and 62 in Durham)
- Resolved: 68,189 (85.4%); an increase of 945
- Deaths: sadly, 3,166 people have died; an increase of 16
- Hospitalized: 367 people were hospitalized; 75 were in intensive care and of those, 44 were on a ventilator;
- Long-term care homes (according to iPHIS): 85 active outbreaks; 485 confirmed cases in residents; 303 confirmed cases in staff; 1,970 deaths among residents and 8 among staff;
- Lab testing: 5,228,814 completed; 28,567 were completed yesterday, up from 25,279 tests reported on Tuesday; while the backlog of tests waiting to be completed increased to 33,087 from 20,758;
- As of Wednesday, [116 more individuals in schools tested positive from COVID-19](#), 907 cases within the last fourteen days and 1,569 cases reported more than fourteen days ago resulting in a cumulative total of 2,476 cases. 581 schools have reported a case and one school has closed.

Cases in Canada: (November 3rd as of 7pm)

- Total number of cases: 244,935; an increase of 2,974
- Resolved: 203,509 (83.1%);
- Deaths: 10,279 (4.2%);
- People tested per million: 257,070; and
- Percent Positivity: 2.4%

OPHA COVID-19 Key Developments **November 3**

Provincial Developments:

COVID-19 Response Framework:

In consultation with the Chief Medical Officer of Health and other health experts, the Ontario government has developed the [Keeping Ontario Safe and Open Framework](#). This framework aims at ensuring public health measures are targeted, incremental and responsive to help limit the spread of COVID-19, while keeping schools and businesses open, maintaining health system capacity and protecting vulnerable people, including those in long-term care.

Public Health Unit Region Classifications:

As of November 7th, the province will transition public health unit regions to a new framework that categorizes them into five levels described below. Each level includes various restrictions related to activities such as indoor and outdoor gatherings, indoor dining, fitness facilities, recreational activities and sporting events, personal care services, gaming establishments, cinemas and the performing arts.

- **Green-Prevent:** focuses on education and awareness about public health safety measures; weekly incidence rates need to be fewer than 10 cases per 100,000 people and a positivity rate under one per cent.
- **Yellow-Protect:** requires measures in high-risk settings (e.g. restaurants, gyms and movie theatres) and a weekly incidence rate between 10 and 39.9 cases per 100,000 people and positivity rate between one and 2.5 per cent.

- **Orange-Restrict:** requires enhanced restrictions to slow the spread to address increasing hospital and ICU occupancy, a weekly incidence rate between 40 and 99.9 cases per 100,000 people and positivity rate between 2.5 and 9.9 per cent.
- **Red-Control:** requires broader-scale restrictions across multiple sectors as hospital and ICU capacity are at risk of being overwhelmed; the weekly incident rate is more than 100 cases per 100,000 people and a positivity rate above 10 per cent.
- **Lockdown:** involves closing all non-essential businesses as a measure of last and urgent resort.

The following proposed classifications for public health unit regions are based on data for the week of October 26, 2020. Updated data will be used for final review by the Chief Medical Officer of Health and approval by Cabinet on Friday, November 6th:

- **Lockdown:** No public health unit regions
- **Red-Control:** No public health unit regions
- **Orange-Restrict:** Eastern Ontario Health Unit; Ottawa Public Health; Peel Public Health; Toronto Public Health (may be delayed in entering Orange-Restrict level until November 14th); and York Region Public Health.
- **Yellow-Protect:** Brant County Health Unit; City of Hamilton Public Health Services; Durham Region Health Department; and Halton Region Public Health.
- **Green-Prevent:** The remaining public health unit regions are included in this level.

Expanding Access to Real-Time Data:

- Enhancements are being made to [Ontario.ca/coronavirus](https://ontario.ca/coronavirus); information about the spread of the virus, and public health and health system capacity will now be available on this website, including: local cases by public health unit regions, the total number of cases, resolved cases, deaths, and tests completed and how many are positive. The province will continue to add data sets as they become available, such as sources of outbreaks as a subset of overall cases.

Supporting Businesses Affected by COVID-19 Public Health Measures:

- The Ontario government is making \$300M available to businesses required to close or significantly restrict services in areas subject to modified Stage 2 public health restrictions (Ottawa, Peel, Toronto, and York Region) or, going forward, in areas categorized as Control or Lockdown.
- Beginning November 16th, eligible businesses (i.e. restaurants, bars, gyms and cinemas) will be able to apply for temporary property tax and energy cost rebates directly to the province through a single, online application portal.

Federal Developments:

Flu Vaccine:

- Prime Minister Trudeau explained there is strong demand for flu vaccines around the world and pointed to the experience of Australia and New Zealand, which faced their flu season in the springtime. He emphasized that the "flu vaccine is an extremely important measure in terms of...keeping people healthy and preventing our frontline medical systems from being overloaded."
- In response to estimates that show demand for the flu shot is up by 500 percent in Ontario while supplies are very low, the Prime Minister said his administration has ordered larger numbers of flu vaccines than ever before and is "working right now with Ontario to make sure we are getting to them the necessary doses."

Changes to Masking Guidelines:

- Dr. Tam announced a new federal directive on mask wearing that recommends the use of a "three-layer non-medical mask" that will provide another layer of filtering out droplets to improve the level of protection that can be provided by such face coverings. (Two layers of the mask should be made of a tightly woven fabric, such as cotton or linen, and the middle layer should be a filter-type fabric, such as non-woven polypropylene fabric).
- Dr. Tam confirmed this new measure is in line with a statement that was released by the World Health Organization in June 2020 that recommended fabric masks should consist of at least three different materials as well as three different layers of materials.

Rapid Tests:

- When asked about the specific criteria for using antigen rapid tests versus PCR tests, Dr. Tam explained PCR is the "gold standard for testing but to augment the capacity, antigen testing can be done, particularly in places where there is not enough access to laboratories." Dr. Tam indicated however, "if you want to have precise diagnostics, then we advocate the use of PCR."
- She also noted that in situations where there is already an outbreak, antigen testing can be used to supplement the outbreak response and detect individuals who may have contracted the virus and need to be isolated.

Co-existing with COVID-19:

- In response to calls from Ottawa's top public health officer telling residents they need to learn to live with the virus, Dr. Tam explained that "adapting to living with COVID-19 is something we have to do because it's not going to immediately disappear and the population doesn't have much immunity." She also noted that "businesses have to adjust and see what they can do to minimize risks [similar to] a harm reduction approach."

Targeted Support for Businesses:

Finance Minister Freeland introduced Bill C-9, An Act to Amend the Income Tax Act, which would implement new, targeted support to help hard-hit businesses. As previously announced, the business supports include:

- **The new Canada Emergency Rent Subsidy**, which would provide direct rent and mortgage interest support to tenants and property owners until June 2021;
- **The new Lockdown Support**, which would provide an additional 25 per cent through the Canada Emergency Rent Subsidy for qualifying organizations that are subject to a lockdown and must shut their doors or significantly limit their activities under a public health order; and
- **The extension of the Canada Emergency Wage Subsidy until June 2021.**

Details and Links to Other Announcements:

- ***Long-Term Care Infrastructure:*** The government is selling three surplus provincial properties in Oakville, Vaughan and Aurora with the requirement that long-term care homes be built on portions of these properties to create over 800 long-term care beds.
- ***Mandatory Requirements for Travelers to Canada:*** All travelers are required to provide specific information upon and after entry into Canada, including a quarantine plan and contact and travel information and can use the app ArriveCAN to provide this information.

- **CanExport SMEs Program:** This program is helping small businesses with costs related to e-commerce; advertising and search engine optimization; attending virtual trade shows and other business-to-business events; and new international market certifications and requirements.

Trends and Cases in Ontario, Canada and First Nations on Reserve:

Cases Among First Nations on Reserve:

As of November 2nd, Indigenous Services Canada is aware of these confirmed cases of COVID-19 for First Nations communities:

- 1,610 confirmed positive COVID-19
- 500 active cases
- 83 hospitalizations
- 1,095 recovered cases
- 15 deaths

Cases in Ontario: (November 2nd as of 10:30am)

- Total number of cases: 78,705; an increase of 1,050
- The majority of newly confirmed cases are concentrated in five public health units (e.g. 408 new cases in Toronto, 212 in Peel Region, 86 in Halton, 76 in York Region and 57 in Durham)
- Resolved: 67,244 (85.4%); an increase of 837
- Deaths: sadly, 3,166 people have died; an increase of 14
- Hospitalized: 357 people were hospitalized; 73 were in intensive care and of those, 47 were on a ventilator;
- Long-term care homes (according to iPHIS): 78 active outbreaks; 530 confirmed cases in residents; 329 confirmed cases in staff; 1,963 deaths among residents and 8 among staff;
- Lab testing: 5,200,247 completed; 25,279 were completed yesterday, down from 27,908 tests reported on Monday; while the backlog of tests waiting to be completed increased to 20,758 from 15,397;
- As of Tuesday, [69 more individuals in schools tested positive from COVID-19](#), 890 cases within the last fourteen days and 1,338 cases reported more than fourteen days ago resulting in a cumulative total of 2,228 cases. 558 schools have reported a case and one school has closed.

Cases in Canada: (November 2nd as of 7pm)

- Total number of cases: 240,263; an increase of 2,681
- Resolved: 200,052 (83.3%);
- Deaths: 10,208 (4.3%);
- People tested per million: 255,327; and
- Percent Positivity: 2.4%

OPHA COVID-19 Key Developments November 2

Provincial Developments:

***Increase in Cases, Testing and Modified Stage 2:
New Cases:***

- Associate Chief Medical Officer of Health, Dr. Yaffe noted over the weekend Ontario reported: 1,015 cases on Saturday, 977 on Sunday and decrease to 948 cases on Monday; 77 percent of cases were concentrated in those areas in a modified Stage 2: Toronto, Peel, Ottawa and York Region; 27,908 tests were completed Sunday with a positivity rate of 4%; The seven-day average of new daily cases has reached 919, the highest at any point in the pandemic, up from 878 the week before.

Lifting Restrictions:

- Premier Ford confirmed his Cabinet will be meeting Monday to consider a proposal from Chief Medical Officer of Health Dr. Williams on the possibility of having a tiered system with clear criteria for lifting modified Stage 2 restrictions so that businesses would have some predictability for safely reopening during the pandemic.
- Business leaders and the government's caucus members have been looking for more clarity about when a region would face restrictions and the type of closures that would be imposed and ways to reopen safely in the face of continued high rates of infection. Dr. Yaffe said discussions are still ongoing and she cannot "talk about the specifics," while Premier Ford said "let's see what the health table brings to us today and hopefully we will have some better news over the next few days."
- In response to criticism that modified Stage 2 restrictions on restaurants, bars and gyms were based on a "false premise" of selective numbers that excluded data from long-term care (LTC) homes, Dr. Yaffe echoed Chief Medical Officer of Health Dr. Williams position that congregate settings such as LTC homes, which have their own measures in place, couldn't be compared to community settings such as restaurants and gyms.
- Dr. Yaffe explained that prior to modified Stage 2 restrictions being implemented there was data from Toronto and Ottawa showing 30 to 40 percent of outbreaks in community settings were linked to restaurants and gyms; targeted measures were then introduced to address the community transmission. She clarified that recent data showed that the percentage of outbreaks linked to restaurants, bars and gyms has decreased, including during the weeks following implementation of the modified Stage 2 restrictions.

New Directives for Long-Term Care Facilities:

Premier Ford and Long-Term Care Minister Fullerton announced the government is increasing the hours of direct care for each long-term care resident to an average of four hours per day. This new commitment to improve quality of care includes:

- Direct hands-on care to be provided by nurses or personal support workers to support individual clinical and personal care needs.
- Hard targets being set over the next four years to achieve this standard by 2024-25. Progress against these targets will be measured and reported regularly.
- Changes to educate and recruit the tens of thousands of new personal support workers, registered practical nurses and registered nurses that will be required.

Report on COVID-19 Emergency Measures:

- This COVID-19 report outlines the rationale for issuing the 47 emergency orders and the role they played in protecting the community, including limiting the spread of COVID-19, supporting continuity of critical services, business, and vulnerable sectors and providing cost relief to Ontarians.

Flu Vaccine Shortage in Pharmacies:

- In response to media reports that Rexall has paused flu shot appointments due to issues with supply, Premier Ford accused the pharmacy chain of overbooking appointments saying "you knew exactly how many flu shots you had....don't overbook."

Open Position for a Medical Officer of Health:

- In response to media questions asking about a job posting listed by Ontario Health looking for a "medical officer of health," Dr. Yaffe said she spoke with Matt Anderson, CEO of Ontario Health and pointed out how "the [job] title is very similar to the Chief Medical Officer of Health title and can be confusing." She said he agreed and would change the title when he finished with the interviewing process.
- Dr. Yaffe noted the person hired for this position would be "very clinically focused" on hospitals and treatment of people who are ill and provide clinical consultation and advice to the CEO of Ontario Health.
- In response to media questions asking about 'plans for succession' when the Chief Medical Officer of Health's contract expires in the coming months, Dr. Yaffe explained "the Chief Medical Officer of Health is appointed by an order in council [and] there is discussion happening [on] how to ensure continuity."

Federal Developments:

International Travel Restrictions:

Public Safety and Emergency Preparedness Minister Blair and Health Minister Hajdu announced the Government has extended the Mandatory Isolation Order and temporary travel restrictions for all non-US travellers, unless their travel is for non-discretionary reasons, to November 30, 2020. The government has also made some practical adjustments to provisions allowing limited Canada-U.S. cross-border travel, in a few specific circumstances:

- Effective October 31, 2020, residents of Campobello Island, New Brunswick; Stewart, British Columbia; Northwest Angle, Minnesota; and Hyder, Alaska will be exempt from mandatory 14-day quarantine to access the necessities of life (e.g., food, medical services) from the nearest Canadian or American community;
- Students from Canada and the U.S. who regularly cross the border to attend school, along with one driver, and children who are subject to shared custody arrangements, along with one parent, are exempt from mandatory 14-day quarantine. The new provisions to ease pressures related to cross-border students are conditional upon support from provincial and local public health authorities; and
- The government is allowing limited exemptions to mandatory quarantine to enable COVID-testing pilot projects, in coordination with provincial authorities.

Details and Links to Other Announcements:

- **Support Programs for Temporary Foreign Workers:** The Mandatory Isolation Support for Temporary Foreign Workers Program will be extended until November 30, 2020. Under the Program, the federal government will provide a maximum support of \$1,500 for each temporary foreign worker, to employers who are required to isolate workers under the Quarantine Act.

Trends and Cases in Ontario, Canada and First Nations on Reserve:

Cases Among First Nations on Reserve:

As of October 30th, Indigenous Services Canada is aware of these confirmed cases of COVID-19 for First Nations communities:

- 1,421 confirmed positive COVID-19
- 380 active cases
- 77 hospitalizations
- 1,026 recovered cases
- 15 deaths

Cases in Ontario: (November 1st as of 10:30am)

- Total number of cases: 77,655; an increase of 948
- The majority of newly confirmed cases continue to be concentrated in four public health units (e.g. 315 new cases in Toronto, 269 in Peel Region, 81 in York Region and 64 in Ottawa)
- Resolved: 66,407 (85.5%); an increase of 826
- Deaths: sadly, 3,127 people have died; an increase of 25 over the past weekend
- Hospitalized: 328 people were hospitalized; 75 were in intensive care and of those, 45 were on a ventilator;
- Long-term care homes (according to iPHIS): 78 active outbreaks; 502 confirmed cases in residents; 318 confirmed cases in staff; 1,959 deaths among residents and 8 among staff;
- Lab testing: 5,174,968 completed; 27,908 were completed yesterday, down from 41,008 tests reported on Friday; while the backlog of tests waiting to be completed decreased to 15,397 from 41,063;
- As of Monday, [71 more individuals in schools tested positive from COVID-19](#), 892 cases within the last fourteen days and 1,338 cases reported more than fourteen days ago resulting in a cumulative total of 2,230 cases. 558 schools have reported a case and one school has closed.

Cases in Canada: (November 1st as of 7pm)

- Total number of cases: 236,841; an increase of 2,330
- Resolved: 197,729 (83.5%);
- Deaths: 10,179 (4.3%);
- People tested per million: 254,029; and
- Percent Positivity: 2.4%

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